

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:)	Customer No. 49,637
)	
Michael CORTOPASSI, et al.)	Confirmation No.: 8539
)	
Serial No.: 10/672,382)	Group Art Unit: 2624
)	
Filed: September 25, 2003)	Examiner: Lu, Tom Y.
)	
For: METHOD AND APPARATUS FOR)	Office Action Mailed:
USING PRESSURE INFORMATION)	
FOR IMPROVED COMPTUER)	May 31, 2007
CONTROLLED HANDWRITING)	
RECOGNITION, DATA ENTRY,)	
AND USER AUTHENTICATION)	

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Response to Office Action Pursuant to 37 C.F.R. § 1.111 for the above-identified application.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$60.00	<input type="checkbox"/> \$120.00
2 months	<input type="checkbox"/> \$230.00	<input type="checkbox"/> \$460.00
3 months	<input type="checkbox"/> \$525.00	<input checked="" type="checkbox"/> \$1,050.00
4 months	<input type="checkbox"/> \$820.00	<input type="checkbox"/> \$1,640.00

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted via electronic filing (EFS-Web) on the date shown below to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

November 30, 2007
Date of Transmission

/Howard I. Grossman/
Howard I. Grossman

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.
- ☒ Extension fee due with this Request \$1,050.00.
- ☐ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEES FOR CLAIMS:

- ☐ Applicant claims small entity status under 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	19	-	29	=	0	x	\$50.00	\$0.00
Independent Claims	4	-	6	=	0	x	\$210.00	\$0.00
Multiple Dependent Claims	\$370	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								<input type="checkbox"/> \$0.00
Extension Fee								\$1,050.00
TOTAL FEES SUBMITTED HERewith								\$1,050.00

- ☐ No additional fee is required.
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. **50-3102** in the amount of **\$1,050.00**.
- ☒ The Commissioner is authorized to charge Counsel's Deposit Account No. **50-3102** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **50-3102**.

Respectfully submitted,

BERRY & ASSOCIATES P.C.

Dated: November 30, 2007

By: /Howard I. Grossman/
Howard I. Grossman
Reg. No. 48,673

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